

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Fraternity & Sorority Political Action Committee

ADDRESS (number and street) ▼

PO Box 3435

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22302

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00410068

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2015

through

M M M / D D D / Y Y Y Y Y Y
07 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Margee Clancy

Signature of Treasurer

Margee Clancy

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
08 19 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fraternity & Sorority Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
07 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		109808.66
(b) Cash on Hand at Beginning of Reporting Period.....	271654.53	
(c) Total Receipts (from Line 19)	4455.00	334881.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	276109.53	444689.66
7. Total Disbursements (from Line 31)	14929.80	183509.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	261179.73	261179.73
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fraternity & Sorority Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
07 01 2015

To:

M M / D D / Y Y Y Y Y
07 31 2015

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1425.00

164480.00

(ii) Unitemized

1980.00

35526.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

3405.00

200006.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

3405.00

200006.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

1050.00

134875.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

4455.00

334881.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

4455.00

334881.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	4476.80	57336.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4476.80	57336.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	65500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	50.00	175.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	50.00	175.00
29. Other Disbursements	10403.00	60498.73
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14929.80	183509.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14929.80	183509.93

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3405.00	200006.00
34. Total Contribution Refunds (from Line 28(d))	50.00	175.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3355.00	199831.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	4476.80	57336.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	4476.80	57336.20

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 12
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. William Dean

Mailing Address Box 4648 Tech Street

City	State	Zip Code
Lubbock	TX	79409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Texas Tech University

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2015

Transaction ID : SA11AI.19053

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Renee IaconaMailing Address 1 Barkely Lane
Apt. 268

City	State	Zip Code
Gaithersburg	MD	20877

FEC ID number of contributing
federal political committee.

C

Name of Employer

AstraZeneca Pharmaceuticals

Occupation

Oncology TA Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2015

Transaction ID : SA11AI.19044

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Bruce J. Loewenberg

Mailing Address 23000 N Bourbon Road

City	State	Zip Code
Clark	MO	65243

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2015

Transaction ID : SA11AI.19046

Amount of Each Receipt this Period

200.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 12

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas Marten

Mailing Address 23103 West Frontage Road

City	State	Zip Code
Waggoner	IL	62582

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2015

Transaction ID : SA11AI.19047

Amount of Each Receipt this Period

225.00

Contribution

Full Name (Last, First, Middle Initial)

B. Anne Pogson

Mailing Address 12112 Talmay

City	State	Zip Code
Dallas	TX	75230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Volunteer

Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2015

Transaction ID : SA11AI.18923

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

475.00

TOTAL This Period (last page this line number only)..... ►

1425.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 12
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Delta Gamma Fraternity Housing Corp.

Mailing Address 3220 Riverside Drive

Ste. A-2

City

Columbus

State

OH

Zip Code

43221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2015

Transaction ID : SA17.19056

Amount of Each Receipt this Period

1000.00

Non-Contribution Account

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 12

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pennington & Co.

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	7		2	9		2	0	1	5		

Mailing Address 501 Gateway Drive
Suite A

City Lawrence State KS Zip Code 66049-2342

Purpose of Disbursement
Gen Fundraising, Printing, Production, Donor Contact, Database Mgt, Non-
Candidate
Candidate NameCategory/
Type**Transaction ID : SB21B.19069**

Amount of Each Disbursement this Period

3409.94

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Upside Solutions, LLC

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	7		1	6		2	0	1	5		

Mailing Address 10362 Mohawk Trail

City Indianapolis State IN Zip Code 46234

Purpose of Disbursement
Website Hosting and Development

Candidate Name

Category/
Type**Transaction ID : SB21B.19066**

Amount of Each Disbursement this Period

166.25

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3576.19

4476.80

	21b		22		23		24		25		26
	27		28a		28b		28c		X		30b

Fraternity & Sorority Political Action Committee

A. Pi Kappa Phi Foundation

Mailing Address PO Box 240526

City	State	Zip Code
Charlotte	NC	28224

Purpose of Disbursement
Non-Contribution Account - Charitable Donation

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB29.19067

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

250.00

TOTAL This Period (last page this line number only).....

10403.00